 <div style="display: inline-block; vertical-align: middle; text-align: center;"> WASHINGTON STATE DEPARTMENT OF E C O L O G Y </div>		Dangerous Waste Permit Application Part A Form													
Date Received				Reviewed by: <i>[Signature]</i>								Date: 0 9 2 2 2 0 0 8			
Month Day Year				Approved by: <i>[Signature]</i>								Date: 0 9 2 2 2 0 0 8			
0 9 1 9 2 0 0 8															
I. This form is submitted to: (place an "X" in the appropriate box)															
<input type="checkbox"/>		Request modification to a final status permit (commonly called a "Part B" permit)													
<input checked="" type="checkbox"/>		Request a change under interim status													
<input type="checkbox"/>		Apply for a final status permit. This includes the application for the initial final status permit for a site or for a permit renewal (i.e., a new permit to replace an expiring permit).													
<input type="checkbox"/>		Establish interim status because of the wastes newly regulated on:										(Date)			
		List waste codes:													
II. EPA/State ID Number															
W A 7 8 9 0 0 0 8 9 6 7															
III. Name of Facility															
US Department of Energy - Hanford Facility															
IV. Facility Location (Physical address not P.O. Box or Route Number)															
A. Street															
825 Jadwin															
City or Town										State			ZIP Code		
Richland										WA			99352		
County Code (if known)			County Name												
0 0 5			Benton												
B. Land Type		C. Geographic Location								D. Facility Existence Date					
		Latitude (degrees, mins, secs)				Longitude (degrees, mins, secs)				Month		Day		Year	
F		Refer to TOPO Map (Section XV.)								0 3		2 2		1 9 4 3	
V. Facility Mailing Address															
Street or P.O. Box															
P.O. Box 550															
City or Town										State			ZIP Code		
Richland										WA			99352		

VI. Facility contact (Person to be contacted regarding waste activities at facility)													
Name (last)						(first)							
Brockman						David							
Job Title						Phone Number (area code and number)							
Manager						(509) 376-7395							
Contact Address													
Street or P.O. Box													
P.O. Box 550													
City or Town						State		ZIP Code					
Richland						WA		99352					
VII. Facility Operator Information													
A. Name										Phone Number			
Department of Energy Owner/Operator CH2M HILL Plateau Remediation Company Co-Operator for 207-A South Retention Basin *										(509) 376-7395 (509) 376-0556*			
Street or P.O. Box													
P.O. Box 550 P.O. Box 1600 *													
City or Town						State		ZIP Code					
Richland						WA		99352					
B. Operator Type		F											
C. Does the name in VII.A reflect a proposed change in operator?						<input type="checkbox"/> Yes		<input checked="" type="checkbox"/> No		Co-Operator* change			
If yes, provide the scheduled date for the change:						Month		Day		Year			
						1 0		0 1		2 0 0 8			
D. Is the name listed in VII.A. also the owner? If yes, skip to Section VIII.C.										<input type="checkbox"/> Yes		<input checked="" type="checkbox"/> No	
VIII. Facility Owner Information													
A. Name						Phone Number (area code and number)							
David A. Brockman, Operator/Facility-Property Owner						(509) 376-7395							
Street or P.O. Box													
P.O. Box 550													
City or Town						State		ZIP Code					
Richland						WA		99352					
B. Owner Type		F											
C. Does the name in VIII.A reflect a proposed change in owner?						<input type="checkbox"/> Yes		<input checked="" type="checkbox"/> No					
If yes, provide the scheduled date for the change:						Month		Day		Year			
IX. NAICS Codes (5/6 digit codes)													
A. First						B. Second							
5	6	2	2	1		Waste Treatment & Disposal	9	2	4	1	1	0	Administration of Air & Water Resource & Solid Waste Management Programs
C. Third						D. Fourth							
5	4	1	7	1		Research & Development in the Physical, Engineering, & Life Sciences							

X. Other Environmental Permits (see instructions)														
A. Permit Type			B. Permit Number										C. Description	

XI. Nature of Business (provide a brief description that includes both dangerous waste and non-dangerous waste areas and activities)
<p>The 207-A South Retention Basin, also known as the Process Condensate (PC) Basins 1, 2, and 3 (i.e., PC-1, PC-2, and PC-3), began operation in March 1977. The 207-A Basin consists of three concrete cells (S04), each with a 264,979-liter (70,000-gallon) design capacity for a total capacity of 794,937 liters (210,000 gallons). All three cells were coated to prevent constituents from penetrating the concrete. The 207-A South Retention Basin was used for the interim storage of the 242-A Evaporator process condensate to allow for sampling and analysis before the condensate was discharged to the 216-A-37-1 Crib for final disposition. Discharge of 242-A Evaporator process condensate to the 207-A South Retention Basin was terminated on April 12, 1989, when it was determined that the 242-A Evaporator process condensate contained mixed waste regulated under Washington Administrative Code 173-303. The 207-A South Retention Basin no longer receives or stores mixed waste.</p> <p>The 242-A Evaporator process condensate is regulated as mixed waste because the waste is derived from a waste containing spent halogenated and nonhalogenated solvents (F001, F002, F003, F004, and F005), and for the toxicity of ammonia (WT02, state-only toxic dangerous waste). The estimated annual quantity of dangerous waste 793,469 kilograms (1,749,300 pounds) represents the maximum operating capacity of the 207-A South Retention Basin, and a specific gravity for the waste of 1.0, when the 207-A South Retention Basin was operational.</p>

EXAMPLE FOR COMPLETING ITEMS XII and XIII (shown in lines numbered X-1, X-2, and X-3 below): A facility has two storage tanks that hold 1200 gallons and 400 gallons respectively. There is also treatment in tanks at 20 gallons/hr. Finally, a one-quarter acre area that is two meters deep will undergo *in situ* vitrification.

Section XII. Process Codes and Design Capacities							Section XIII. Other Process Codes									
Line Number		A. Process Codes (enter code)			B. Process Design Capacity		C. Process Total Number of Units	Line Number		A. Process Codes (enter code)			B. Process Design Capacity		C. Process Total Number of Units	D. Process Description
					1. Amount	2. Unit of Measure (enter code)							1. Amount	2. Unit of Measure (enter code)		
X	1	S	0	2	1,600	G	002	X	1	T	0	4	700	C	001	In situ vitrification
X	2	T	0	3	20	E	001									
X	3	T	0	4	700	C	001									
	1	S	0	4	794,937	L	003		1							
	2								2							
	3								3							
	4								4							
	5								5							
	6								6							
	7								7							
	8								8							
	9								9							
1	0							1	0							
1	1							1	1							
1	2							1	2							
1	3							1	3							
1	4							1	4							
1	5							1	5							
1	6							1	6							
1	7							1	7							
1	8							1	8							
1	9							1	9							
2	0							2	0							
2	1							2	1							
2	2							2	2							
2	3							2	3							
2	4							2	4							
2	5							2	5							

XIV. Description of Dangerous Wastes

Example for completing this section: A facility will receive three non-listed wastes, then store and treat them on-site. Two wastes are corrosive only, with the facility receiving and storing the wastes in containers. There will be about 200 pounds per year of each of these two wastes, which will be neutralized in a tank. The other waste is corrosive and ignitable and will be neutralized then blended into hazardous waste fuel. There will be about 100 pounds per year of that waste, which will be received in bulk and put into tanks.

Line Number	A. Dangerous Waste No.				B. Estimated Annual Quantity of Waste	C. Unit of Measure	D. Processes											(2) Process Description [If a code is not entered in D (1)]
							(1) Process Codes											
X 1	D	0	0	2	400	P	S	0	1	T	0	1						
X 2	D	0	0	1	100	P	S	0	2	T	0	1						
X 3	D	0	0	2												Included with above		
1	F	0	0	1	793,469	K	S	0	4									
2	F	0	0	2		K	S	0	4									
3	F	0	0	3		K	S	0	4									
4	F	0	0	4		K	S	0	4									
5	F	0	0	5		K	S	0	4									
6	W	T	0	2		K	S	0	4									
7																		
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9																		
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25																		

XV. Map

Attach to this application a topographic map of the area extending to at least one (1) mile beyond property boundaries. The map must show the outline of the facility; the location of each of its existing and proposed intake and discharge structures; each of its dangerous waste treatment, storage, recycling, or disposal units; and each well where fluids are injected underground. Include all springs, rivers, and other surface water bodies in this map area, plus drinking water wells listed in public records or otherwise known to the applicant within ¼ mile of the facility property boundary. The instructions provide additional information on meeting these requirements.

Topographic map is located in the Ecology Library

XVI. Facility Drawing

All existing facilities must include a scale drawing of the facility (refer to Instructions for more detail).

XVII. Photographs

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment, recycling, and disposal areas; and sites of future storage, treatment, recycling, or disposal areas (refer to Instructions for more detail).

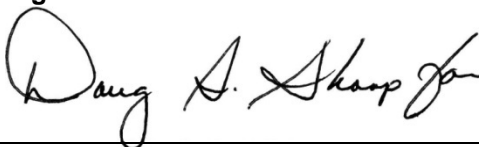
XVIII. Certifications

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Operator

Name and Official Title (type or print)

David A. Brockman, Manager
U.S. Department of Energy
Richland Operations Office

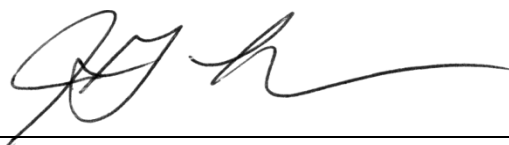
Signature

Date Signed

9/19/08

Co-Operator*

Name and Official Title (type or print)

John G. Lehew, III
President and Chief Executive Officer
CH2M HILL Plateau Remediation Company

Signature

Date Signed

9/2/08

Co-Operator – Address and Telephone Number*

P.O. Box 1600
Richland, WA 99352
(509) 376-0556

Facility-Property Owner

Name and Official Title (type or print)

David A. Brockman, Manager
U.S. Department of Energy
Richland Operations Office

Signature

Date Signed

9/19/08

Comments

In Section VII. Facility Operator Information, there is no change to DOE as the Facility Owner/Operator; only a change in Co-Operator*. The change in Co-Operator* will be effective October 1, 2008.

207-A South Retention Basin





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